

County: Marathon  
WAUSAU MANOR  
3107 WESTHILL DRIVE

Facility ID: 9310

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WAUSAU 54401 Phone: (715) 842-0575  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/01): 60  
Total Licensed Bed Capacity (12/31/01): 60  
Number of Residents on 12/31/01: 56

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 57

Corporation  
Skilled  
No  
Yes  
Yes  
57

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Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		37.5
Supp. Home Care-Personal Care	No					1 - 4 Years		44.6
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	1.8	More Than 4 Years		17.9
Day Services	No	Mental Illness (Org./Psy)	26.8	65 - 74	3.6			-----
Respite Care	No	Mental Illness (Other)	1.8	75 - 84	28.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	53.6	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	3.6	95 & Over	12.5	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.8		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	5.4		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	25.0	65 & Over	98.2	-----		
Transportation	No	Cerebrovascular	16.1		-----	RNs		17.2
Referral Service	No	Diabetes	1.8	Sex	%	LPNs		6.7
Other Services	No	Respiratory	3.6		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	14.3	Male	25.0	Aides, & Orderlies		
Mentally Ill	No		-----	Female	75.0			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

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#### Method of Reimbursement

Level of Care	Medicare (Title 18)			Medicaid (Title 19)			Other		Private Pay			Family Care		Managed Care			Total Resi- dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)	
Int. Skilled Care	0	0.0	0	4	13.3	135	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	7.1
Skilled Care	4	100.0	300	25	83.3	116	0	0.0	0	22	100.0	170	0	0.0	0	0	0.0	0	51	91.1
Intermediate	---	---	---	1	3.3	97	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.8
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0		30	100.0		0	0.0		22	100.0		0	0.0		0	0.0		56	100.0

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Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
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Percent Admissions from		Activities of	%	% Needing Assistance of	% Totally Dependent	Total Number of Residents
Private Home/No Home Health	4.5	Daily Living (ADL)	Independent	One Or Two Staff		
Private Home/With Home Health	0.0	Bathing	1.8	76.8	21.4	56
Other Nursing Homes	4.5	Dressing	19.6	58.9	21.4	56
Acute Care Hospitals	90.9	Transferring	26.8	51.8	21.4	56
Psych. Hosp. -MR/DD Facilities	0.0	Toilet Use	28.6	41.1	30.4	56
Rehabilitation Hospitals	0.0	Eating	25.0	57.1	17.9	56
Other Locations	0.0	*****				
Total Number of Admissions	88	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	7.1	Receiving Respiratory Care		12.5
Private Home/No Home Health	39.5	Occ/Freq. Incontinent of Bladder	55.4	Receiving Tracheostomy Care		0.0
Private Home/With Home Health	15.1	Occ/Freq. Incontinent of Bowel	42.9	Receiving Suctioning		0.0
Other Nursing Homes	2.3			Receiving Ostomy Care		3.6
Acute Care Hospitals	10.5	Mobility		Receiving Tube Feeding		3.6
Psych. Hosp. -MR/DD Facilities	0.0	Physically Restrained	5.4	Receiving Mechanically Altered Diets		14.3
Rehabilitation Hospitals	0.0					
Other Locations	18.6	Skin Care		Other Resident Characteristics		
Deaths	14.0	With Pressure Sores	3.6	Have Advance Directives		73.2
Total Number of Discharges		With Rashes	0.0	Medications		
(Including Deaths)	86			Receiving Psychoactive Drugs		57.1

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Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities  
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	This Facility %	Ownership: Peer Group Ratio	Bed Size: 50-99 Peer Group Ratio	Licensure: Skilled Peer Group Ratio	All Facilities %	Ratio			
Occupancy Rate: Average Daily Census/Licensed Beds	95.0	82.7	1.15	85.1	1.12	84.3	1.13	84.6	1.12
Current Residents from In-County	85.7	82.1	1.04	80.0	1.07	82.7	1.04	77.0	1.11
Admissions from In-County, Still Residing	19.3	18.6	1.04	20.9	0.92	21.6	0.89	20.8	0.93
Admissions/Average Daily Census	154.4	178.7	0.86	144.6	1.07	137.9	1.12	128.9	1.20
Discharges/Average Daily Census	150.9	179.9	0.84	144.8	1.04	139.0	1.09	130.0	1.16
Discharges To Private Residence/Average Daily Census	82.5	76.7	1.07	60.4	1.37	55.2	1.49	52.8	1.56
Residents Receiving Skilled Care	98.2	93.6	1.05	90.5	1.09	91.8	1.07	85.3	1.15
Residents Aged 65 and Older	98.2	93.4	1.05	94.7	1.04	92.5	1.06	87.5	1.12
Title 19 (Medicaid) Funded Residents	53.6	63.4	0.85	58.0	0.92	64.3	0.83	68.7	0.78
Private Pay Funded Residents	39.3	23.0	1.70	32.0	1.23	25.6	1.54	22.0	1.79
Developmentally Disabled Residents	0.0	0.7	0.00	0.9	0.00	1.2	0.00	7.6	0.00
Mentally Ill Residents	28.6	30.1	0.95	33.8	0.84	37.4	0.76	33.8	0.85
General Medical Service Residents	14.3	23.3	0.61	18.3	0.78	21.2	0.67	19.4	0.74
Impaired ADL (Mean)	51.8	48.6	1.07	48.1	1.08	49.6	1.04	49.3	1.05
Psychological Problems	57.1	50.3	1.14	51.0	1.12	54.1	1.06	51.9	1.10
Nursing Care Required (Mean)	4.7	6.2	0.76	6.0	0.78	6.5	0.72	7.3	0.64